

Appendix 6

Evidence review: An analysis of the evidence for parenting interventions for parents of vulnerable children aged up to six years



June 2013

Appendix 6: Data extracted regarding the Emerging interventions

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interventions for parents of vulnerable children
aged up to six years

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Disclaimer

This analysis of parenting interventions was commissioned by the Families Commission of New Zealand. It was conducted between March and May 2013. Readers are advised to consider new evidence arising post the publication of this review when selecting and implementing parenting interventions.

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Contents

Appendix 6: Data extracted regarding the Emerging interventions	4
1. Child FIRST	4
2. Child-Parent Psychotherapy (CPP)	10
3. Cognitive Behavioral Therapy for Sexually Abused Preschoolers (CBT-SAP) 17	
4. Early Intervention Foster Care Program (EIFC)	24
5. Early Start	30
6. Parent training prevention model – description	41
7. Parents Under Pressure (PUP)	47

Appendix 6: Data extracted regarding the Emerging interventions

1. Child FIRST

Study ID (first surname + year) Lowell et al. 2011	Initials of person extracting data MT Date 16/5/2013
Full citation Lowell, D. I., Carter, A. S., Godoy, L., Paulicin, B., & Briggs-Gowan, M. J. (2011). A Randomized Controlled Trial of Child FIRST: A Comprehensive Home-Based Intervention Translating Research Into Early Childhood Practice. <i>Child Development</i> , 82(1), 193-208. doi: 10.1111/j.1467-8624.2010.01550.x.	
Papers cited/referenced in this paper that relate to this intervention but are not already included in the REA	
Was a cluster design used? If so, clustered by schools, communities, families etc.? No	
Country in which study was conducted USA	
Inclusion criteria Children: Child aged 6–36 months, screened positive for social-emotional / behavioural problems on the Brief Infant-Toddler Social and Emotional Assessment, (BITSEA; Briggs-Gowan & Carter, 2006) and /or the parent screened high for psychosocial risk on a risk screen developed for this study (Parent Risk Questionnaire [PRQ]); lived in the city of Bridgeport, Connecticut; and was in a permanent caregiving environment Parents:	
Exclusion criteria Children: Children referred directly from community providers and families with prior involvement with Child FIRST were not eligible for the study. Parents:	

Participant demographics at baseline			
		Intervention	Comparison
Number assigned to groups	Children	78	79
	Parents		
Number in final analysis	Children	58	59
	Parents		
Age (mean, SD, range)	Children	Mean = 19.0; SD = 9.2 months	Mean = 18.0; SD = 8.8 months
	Parents	Mean = 27.7; SD = 7.0 years	Mean = 26.9; SD = 6.9 years
Sex	Children	42.3% male	45.6% male
	Parents	100% female	100% female
Education	Parents	27.0% < 9 th grade; 34.6% 9 th -12 th grade (no degree); 22.2% High school degree/GED; 6.4% some college (no degree); 5.0% 2-year degree; 1.6% Bachelor's degree/other	16.7% < 9 th grade; 27.9% 9 th -12 th grade (no degree); 26.9% High school degree/GED; 19.2% some college (no degree); 6.5% 2-year degree; 2.6% Bachelor's degree/other
Ethnicity/indigenous	Parents	60.3% Latino/Hispanic; 26.9% African American; 6.4% Caucasian; 6.4% other	57.0% Latino/Hispanic; 32.9% African American; 8.9% Caucasian; 1.3% other
	Children		
Notes			

Vulnerability or maltreatment issues (Reason this child/parent/family is in this intervention. Select as many as applicable.)		
	Intervention Yes/no	Comparison Yes/no
History of maltreatment (either parents as abusers or children were abused)		
At-risk of maltreatment (no description of reason)		
Vulnerable, troubled or fragile (use these phrases but no		

mention of maltreatment)		
Domestic, family or intimate partner violence		
Teen parent		
Low SES/disadvantaged		
Parental substance abuse		
Parent was maltreated as a child		
Parent has a physical disability		
Parent has learning disability/difficulty or intellectual disability		
Parent has a mental illness		
Child has a disability or additional needs		
Other (please list)	Infant socio-emotional problems; parent psycho-social risk	Infant socio-emotional problems; parent psycho-social risk
Cannot tell		

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	
Service model	
System of care	Yes

What type of comparison condition was used?

Comparison condition	Yes/no
No treatment (no further detail required)	
Treatment as usual/usual care	Yes
Waitlist	
Alternate treatment	

Brief description of each condition being compared

Treatment – Child FIRST Intervention

Control – Usual care

Intervention delivery and dose (select as many as applicable)		
		Intervention Yes/no
At what level was it delivered?	Individual parents	
	Individual parent-child dyads	
	Individual children	
	Individual families	Yes
	Groups of parents	
	Groups of parent-child dyads	
	Groups of children	
	Groups of families	
	Household	
	School	
	Community/region	
	Cannot tell	
Setting of delivery	Home	Yes
	School	
	Clinic, medical or health	
	Community	
	Other	
	Cannot tell	
Outcome domains targeted	Child development	Yes
	Child behaviour	Yes
	Safety and physical wellbeing	Yes
	Basic child care	
	Parent-child relationship	Yes
	Family relationship	Yes
	Systems outcomes	Yes
Dose	Number of sessions	Mean = 24.0 contacts/sessions; SD = 14.3
	Duration of sessions	45-90 minutes
	Total duration of program	Mean = 22.1 weeks; SD = 14.5 weeks; Median =

		18.7 weeks
Person delivering	Was it a professional? (person with qualifications, for e.g., social worker, psychologist, nurse, teacher, youth worker)	Yes
	Was it a non-professional? (e.g., peer, paraprofessional, person that may be trained but does not have a qualification relevant to family support/education or child welfare etc.)	
	Cannot tell	

Results

<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
		<u>Child FIRST</u>	<u>Usual Care</u>	
% with child language problems	Infant-Toddler Developmental Assessment (IDA)	+ (smaller percentage) compared to control		12 months
% with problems in any ITSEA domain	Infant-Toddler Social and Emotional Assessment	+ (smaller percentage) compared to control		12 months
% with ITSEA externalizing problems	Infant-Toddler Social and Emotional Assessment	+ (smaller percentage) compared to control		12 months
% of parents with problematic global psychiatric symptoms	Brief Symptom Inventory	+ (smaller percentage) compared to control		12 months
% with any parental stress problems	Parental Stress Inventory scale	+ (smaller percentage) compared to		12 months

(Parent Distress, Difficult Child, and Parent–Child Dysfunctional Interaction)		control		
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Intervention delivery	Intervention content
<p>Assessment of child and family</p> <p>Individualised plan</p> <p>Linkage to other services, such as mental health, health and early care, early interventions, education, child protection and social and concrete services</p> <p>Based on family priorities, strengths, culture and needs</p> <p>Collaboration with families</p>	<p>Home visiting components are guided by parental need rather than a fixed curriculum</p> <p>Observations of child’s emotional, cognitive and physical development</p> <p>Observation of parent-child interactions</p> <p>Psychoeducation including developmental stages, expectations and means of typical behaviours</p> <p>Reflective functioning to understand the child’s feelings and the meaning of the child’s unique and challenging behaviours</p> <p>Psychodynamic understanding of the mothers history, feelings and experience of the child</p> <p>Alternative perspectives of child behaviour and new parental responses</p> <p>Positive reinforcement of both parents’ and child’s strengths to promote parents self-esteem</p>

2. Child-Parent Psychotherapy (CPP)

Study ID (first surname + year) Lieberman 2005; 2006; Ghosh Ippen 2011	Initials of person extracting data MT Date 16/5/2013
Full citation Lieberman, A. F., Van Horn, P. & Ippen, C. G. (2005) Toward evidence-based treatment: Child-parent psychotherapy with preschoolers exposed to marital violence. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i> , 44(12), 1241-1248 Ghosh Ippen, C., Harris, W. W., Van Horn, P., & Lieberman, A. F. (2011). Traumatic and stressful events in early childhood: Can treatment help those at highest risk? <i>Child Abuse & Neglect</i> , 35(7), 504-513. doi:10.1016/j.chiabu.2011.03.009	
Papers cited/referenced in this paper that relate to this intervention but are not already included in the REA Lieberman, A. F., Ghosh Ippen, C., & Van Horn, P. (2006). Child-Parent Psychotherapy: 6-month follow-up of a randomized controlled trial. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i> , 45(8), 913–918.	
Was a cluster design used? If so, clustered by schools, communities, families etc.? No	
Country in which study was conducted USA	
Inclusion criteria Children: Child was 3 to 5 years old, had been exposed to marital violence as confirmed by mother's report on the Conflict Tactics Scale 2 (Straus et al., 1996), and the perpetrator was not living in the home. Mother–child dyads were referred because there were clinical concerns about the child's behavior or mother's parenting after the child witnessed or overheard marital violence. Parents:	
Exclusion criteria Children: Mental retardation or autistic spectrum disorder. Parents: Documented abuse of the target child, current substance abuse and homelessness, mental retardation, and psychosis.	

Participant demographics at baseline			
		Intervention	Comparison
Number assigned to groups	Children	36	29
	Parents		
Number in final analysis	Children	27	25
	Parents		
Age (mean, SD, range)	Children	*Mean = 4.06 years; SD = 0.82 years	
	Parents	* Mean =31.48 years; SD = 6.23 years	
Sex	Children	*n = 39 female	
	Parents	100% female	100% female
Education	Parents	* Mean = 12.51 years; SD = 3.96	
Ethnicity/indigenous	Parents	* 37.3% Latina; 24% white; 14.7% African American; 10.7% Asian; and the rest of mixed or other ethnicities	
	Children	* 38.7% mixed ethnicity (predominantly Latino/white); 28% Latino; 14.7% African American; 9.3% white; 6.7% Asian; and 2.6% of another ethnicity	
Notes			
* Only aggregate demographic data presented for the entire sample at baseline. N=75			

Vulnerability or maltreatment issues (Reason this child/parent/family is in this intervention. Select as many as applicable.)		
	Intervention Yes/no	Comparison Yes/no
History of maltreatment (either parents as abusers or children were abused)		
At-risk of maltreatment (no description of reason)		
Vulnerable, troubled or fragile (use these phrases but no mention of maltreatment)		
Domestic, family or intimate partner violence	Yes	Yes
Teen parent		
Low SES/disadvantaged		
Parental substance abuse		
Parent was maltreated as a child		
Parent has a physical disability		

Parent has learning disability/difficulty or intellectual disability		
Parent has a mental illness		
Child has a disability or additional needs		
Other (please list)		
Cannot tell		

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	Yes
Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
No treatment (no further detail required)	
Treatment as usual/usual care	Yes
Waitlist	
Alternate treatment	

Brief description of each condition being compared

Treatment – Child-Parent Psychotherapy

Control – Case management plus individual treatment (usual care)

Intervention delivery and dose (select as many as applicable)

		Intervention Yes/no
At what level was it delivered?	Individual parents	
	Individual parent-child dyads	Yes
	Individual children	
	Individual families	
	Groups of parents	
	Groups of parent-child dyads	
	Groups of children	

	Groups of families	
	Household	
	School	
	Community/region	
	Cannot tell	
Setting of delivery	Home	
	School	
	Clinic, medical or health	
	Community	
	Other	
	Cannot tell	Yes
Outcome domains targeted	Child development	Yes
	Child behaviour	Yes
	Safety and physical wellbeing	Yes
	Basic child care	
	Parent-child relationship	
	Family relationship	Yes
	Systems outcomes	
Dose	Number of sessions	Mean = 32.09 sessions; SD = 15.20 sessions
	Duration of sessions	60 minutes
	Total duration of program	50 weeks
Person delivering	Was it a professional? (person with qualifications, for e.g., social worker, psychologist, nurse, teacher, youth worker)	Yes
	Was it a non-professional? (e.g., peer, paraprofessional, person that may be trained but does not have a qualification relevant to family support/education or child welfare etc.)	
	Cannot tell	
<u>Results</u>		
Liberman et al. 2005		

<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
		Treatment	Control	
Traumatic Stress Disorder	Semi-structured Interview for Diagnostic Classification DC: 0-3 for Clinicians	+ Improvement compared to control		Post-treatment
Child behaviour (total score)	Child Behaviour Checklist	+ Improvement compared to control		Post-treatment
Avoidance behaviour	Clinician-Administered PTSD Scale	+ Improvement compared to control		Post-treatment

Liberman et al. 2006

<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
		<u>Treatment</u>	<u>Control</u>	
Child behaviour (total score)	Child Behaviour Checklist	+ Improvement compared to control		6 month follow up

Ghosh Ippen et al. 2011

<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
		Treatment	Control	
Child behaviour (total score)	Child Behaviour Checklist	+ Improvement compared to control		6 month follow up

Intervention delivery	Intervention content
<p>Initial sessions focus on assessment</p> <p>Communication of assessment finding with mother</p> <p>Individualised treatment plan</p> <p>Discussion</p>	<p>Parent-child relationships</p> <p>Safety in the environment</p> <p>Promote safe behaviour</p> <p>Support appropriate limit setting</p> <p>Self-regulation (development guidance regarding how children regulate affect and emotional reactions, support and label affective experiences, support parent's skills to respond in helpful, soothing ways when child is upset)</p> <p>Reciprocity in relationships (reinforces parent and highlight parent's and child's love and understanding of each other, support expression of positive negative feelings for important people, develop interventions to change maladaptive patterns of interactions)</p> <p>Focus on traumatic events (help parents acknowledge what child has witnessed and remembered, help parents and child understand each other's perspective to the trauma. Provide developmental guidance acknowledging response to trauma, make linkage between past experiences and current thoughts, feelings and behaviours, help</p>

Intervention delivery	Intervention content
	<p>parents understand link between her own experiences and current feelings and parenting practices, highlight the difference between past and present circumstances, support parent and child in creating a joint narrative, reinforces behaviours that help parent and child master the trauma and gain new perspective)</p> <p>Continuity of daily living (foster prosocial adaptive behaviour, foster efforts to engage in appropriate activities, foster development of a daily routine)</p>

3. Cognitive Behavioral Therapy for Sexually Abused Preschoolers (CBT-SAP)

Study ID (first surname + year) Cohen & Mannarino 1996a; 1996b; Cohen & Mannarino 1998	Initials of person extracting data MT Date 16/5/2013
Full citation <p>Cohen, J. A., & Mannarino, A. P. (1996a). Factors that mediate treatment outcome of sexually abused preschool children. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i>, 35(10), 1402-1410. doi:10.1097/00004583-199610000-00028</p> <p>Cohen, J. A., & Mannarino, A. P. (1996b). A treatment outcome study for sexually abused preschool children: Initial findings. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i>, 35(1), 42-50.</p> <p>Cohen, J. A., & Mannarino, A. P. (1998). Factors that mediate treatment outcome of sexually abused preschool children: Six- and 12-month follow-up. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i>, 37(1), 44-51.</p>	
Papers cited/referenced in this paper that relate to this intervention but are not already included in the REA	
Was a cluster design used? If so, clustered by schools, communities, families etc.? No	
Country in which study was conducted USA	
Inclusion criteria Children: Children aged 3 through 6 years (2 years, 11 months to 7 years, 1 month: Age criteria specified in Cohen & Mannarino 1998). The child had to have experienced some form of sexual abuse (sexual exploitation involving physical contact between a child and another person. Physical contact included anal, genital, oral, and/or breast contact), with the most recent episode of sexual abuse having occurred no more than 6 months prior to referral to the study. Where applicable, the sexual abuse had to have been reported to Child Protective Services prior to the child's acceptance into the study. In all cases, a child was included only if the child also had either a Child Protective Services-indicated report, if there had been independent confirmation of abuse by the agency in Pittsburgh with recognized expertise in conducting investigative evaluations, or if there was physical evidence of sexual abuse. Parents:	

Exclusion criteria

Children:

Parents:

Mental retardation or pervasive developmental disorder, psychotic symptoms, a serious medical illness, psychotic disorder or active substance abuse in the parent participating in treatment, or the lack of a long-term caretaker to participate in the study (i.e., if a child was expected to remain with the present caretaker for less than 12 months, the child was not included).

Participant demographics at baseline

		Intervention	Comparison
Number assigned to groups	Children	39	28
	Parents		
Number in final analysis	Children	Only total cohort of final sample reported. N = 43	
	Parents		
Age (mean, SD, range)	Children	*Mean = 4.68 years; Range = 2.11 to 7.1 years.	
	Parents		
Sex	Children	*42% male	
	Parents		
Education	Parents		
Ethnicity/indigenous	Parents		
	Children	*54% Caucasian; 42% African-American; and 4% other	

Notes

* Only aggregate demographic data reported for the sample N = 67.

Vulnerability or maltreatment issues (Reason this child/parent/family is in this intervention. Select as many as applicable.)

	Intervention Yes/no	Comparison Yes/no
History of maltreatment (either parents as abusers or children were abused)	Yes	Yes
At-risk of maltreatment (no description of reason)		
Vulnerable, troubled or fragile (use these phrases but no mention of maltreatment)		
Domestic, family or intimate partner violence		

Teen parent		
Low SES/disadvantaged		
Parental substance abuse		
Parent was maltreated as a child		
Parent has a physical disability		
Parent has learning disability/difficulty or intellectual disability		
Parent has a mental illness		
Child has a disability or additional needs		
Other (please list)		
Cannot tell		

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

<u>Approach type</u>	<u>Yes/no</u>
Program	Yes
Service model	
System of care	

What type of comparison condition was used?

<u>Comparison condition</u>	<u>Yes/no</u>
No treatment (no further detail required)	
Treatment as usual/usual care	
Waitlist	
Alternate treatment	Yes

Brief description of each condition being compared

Treatment – Cognitive-Behavioral Therapy for Sexually Abused Preschool children (CBT-SAP)

Comparison – Non-directive Supportive Therapy (NST)

Intervention delivery and dose (select as many as applicable)

		Intervention Yes/no
At what level was it delivered?	Individual parents	
	Individual parent-child dyads	Yes

	Individual children	
	Individual families	
	Groups of parents	
	Groups of parent-child dyads	
	Groups of children	
	Groups of families	
	Household	
	School	
	Community/region	
	Cannot tell	
Setting of delivery	Home	
	School	
	Clinic, medical or health	Yes
	Community	
	Other	
	Cannot tell	
Outcome domains targeted	Child development	Yes
	Child behaviour	Yes
	Safety and physical wellbeing	
	Basic child care	
	Parent-child relationship	Yes
	Family relationship	Yes
	Systems outcomes	
Dose	Number of sessions	12
	Duration of sessions	90 minutes (50 mins with parent and 30-40 mins with child)
	Total duration of program	12 weeks
Person delivering	Was it a professional? (person with qualifications, for e.g., social worker, psychologist, nurse, teacher, youth worker)	Yes
	Was it a non-professional? (e.g., peer, paraprofessional, person that may be trained but does not have a qualification relevant to family)	

	support/education or child welfare etc.	
	Cannot tell	

Results

Cohen & Mannarino 1996b

<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
		<u>Non-directive supportive therapy (NST)</u>	<u>Cognitive-behavioral therapy adapted for sexually abused preschool children (CBT-SAP)</u>	
Behaviour Profile total	Child Behaviour Checklist (CBCL)		+ (Lower score) compared to control	Post-treatment
Internalizing problems	Child Behaviour Checklist (CBCL)		+ (Lower score) compared to control	Post-treatment
Sexualised behaviour	Child Sexual Behaviour Inventory (CSBI)		+ (Lower score) compared to control	Post-treatment
Frequency of problematic behaviours	Weekly Behaviour Record (WBR)		+ (Lower score) compared to control	Post-treatment

Cohen & Mannarino 1998

<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.	<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)

		<u>Non-directive supportive therapy (NST)</u>	<u>Cognitive-behavioral therapy adapted for sexually abused preschool children (CBT-SAP)</u>	
Sexualised behaviour	Child Sexual Behaviour Inventory (CSBI)		+ (Lower score) compared to control	12 Month follow up
Type of problematic behaviour	Weekly Behaviour Record (WBR)		+ (Fewer types) compared to control	12 Month follow up
Frequency of problematic behaviours	Weekly Behaviour Record (WBR)		+ (Lower score) compared to control	12 Month follow up

Intervention delivery	Intervention content
Cognitive behavioural therapy Cognitive reframing Thought stopping, Positive imagery Contingency reinforcement. Parenting management training Problem solving Psychoeducation Supportive interventions	For parents: Ambivalence about belief in the sexual abuse Ambivalence towards the perpetrator Attributions regarding the abuse Feelings that the child is damaged Management of child fear and anxiety Provision of appropriate emotional support to the child Management of appropriate behaviours Dealing with the parents issues in relation to their own abuse For the child: Attributions regarding the abuse Ambivalent feeling towards the perpetrators Child safety and assertiveness training Appropriate versus inappropriate touching

Intervention delivery	Intervention content
	Inappropriate behaviour Issues of fear and anxiety

4. Early Intervention Foster Care Program (EIFC)

Study ID (first surname + year) Fisher et al. 2005	Initials of person extracting data MT Date 17/5/2013																		
Full citation Fisher, P. A., Burraston, B., & Pears, K. (2005). The Early Intervention Foster Care Program: Permanent Placement Outcomes From a Randomized Trial. <i>Child Maltreatment</i> , 10(1), 61-71.																			
Papers cited/referenced in this paper that relate to this intervention but are not already included in the REA																			
Was a cluster design used? If so, clustered by schools, communities, families etc.? No																			
Country in which study was conducted USA																			
Inclusion criteria Children: 3- to 6-year-old foster children new to the foster care system, reentering foster care, and moving between placements (expected to remain in care for more than 3 months). Parents:																			
Exclusion criteria Children: Parents:																			
Participant demographics at baseline <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 20%;"></th> <th style="width: 20%;"></th> <th style="width: 20%;">Intervention</th> <th style="width: 20%;">Comparison</th> </tr> </thead> <tbody> <tr> <td rowspan="2">Number assigned to groups</td> <td>Children</td> <td>47</td> <td>43</td> </tr> <tr> <td>Parents</td> <td></td> <td></td> </tr> <tr> <td rowspan="2">Number in final analysis</td> <td>Children</td> <td>47</td> <td>43</td> </tr> <tr> <td>Parents</td> <td></td> <td></td> </tr> </tbody> </table>				Intervention	Comparison	Number assigned to groups	Children	47	43	Parents			Number in final analysis	Children	47	43	Parents		
		Intervention	Comparison																
Number assigned to groups	Children	47	43																
	Parents																		
Number in final analysis	Children	47	43																
	Parents																		

Age (mean, SD, range)	Children	Mean = 4.50 years; SD = 0.86 years	Mean = 4.22 years; SD = 0.74 years
	Parents		
Sex	Children	66% Male	60% Male
	Parents		
Education	Parents		
Ethnicity/indigenous	Parents		
	Children	79% White; 3% Native American; 18% Hispanic or Latino	92% White; 4% Native American; 4% Hispanic or Latino
Notes			

Vulnerability or maltreatment issues (Reason this child/parent/family is in this intervention. Select as many as applicable.)

	Intervention Yes/no	Comparison Yes/no
History of maltreatment (either parents as abusers or children were abused)		
At-risk of maltreatment (no description of reason)		
Vulnerable, troubled or fragile (use these phrases but no mention of maltreatment)		
Domestic, family or intimate partner violence		
Teen parent		
Low SES/disadvantaged		
Parental substance abuse		
Parent was maltreated as a child		
Parent has a physical disability		
Parent has learning disability/difficulty or intellectual disability		
Parent has a mental illness		
Child has a disability or additional needs		
Other (please list)	Foster care	Foster care
Cannot tell		

Intervention and comparison conditions**What type of approach was the intervention? (refer to definitions)**

Approach type	Yes/no
Program	
Service model	Yes
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
No treatment (no further detail required)	
Treatment as usual/usual care	Yes
Waitlist	
Alternate treatment	

Brief description of each condition being compared

Treatment – The Early Intervention Foster Care Program

Comparison – Regular foster care

Intervention delivery and dose (select as many as applicable)

		Intervention Yes/no
At what level was it delivered?	Individual parents	Yes
	Individual parent-child dyads	
	Individual children	Yes
	Individual families	
	Groups of parents	
	Groups of parent-child dyads	
	Groups of children	Yes
	Groups of families	
	Household	
	School	
	Community/region	
	Cannot tell	
Setting of delivery	Home	Yes

	School	
	Clinic, medical or health	
	Community	
	Other	Playgroup
	Cannot tell	
Outcome domains targeted	Child development	
	Child behaviour	
	Safety and physical wellbeing	
	Basic child care	
	Parent-child relationship	
	Family relationship	
	Systems outcomes	Yes
Dose	Number of sessions	Foster parents: daily telephone contacts, weekly foster parent support group meetings, and 24-hour on-call crisis intervention. Children: attend weekly therapeutic playgroup sessions.
	Duration of sessions	Cannot tell
	Total duration of program	Children: 6-9 months
Person delivering	Was it a professional? (person with qualifications, for e.g., social worker, psychologist, nurse, teacher, youth worker)	Yes
	Was it a non-professional? (e.g., peer, paraprofessional, person that may be trained but does not have a qualification relevant to family	

	support/education or child welfare etc.)	
	Cannot tell	
Results		
<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. If there is no significant effect, leave blank.
		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
		<u>EIFC</u>
		<u>Regular foster care</u>
Failure of a permanent placement	Children's placement records obtained from the Oregon DHS Child Welfare Division of Lane County	+ (Fewer failed permanent placements) compared to regular foster care
		24 months

Intervention delivery	Intervention content
<p>Training of foster care parents is completed before they receive foster care (unlike most other parenting interventions that are for families with children living with them)</p> <p>After placement, foster parents work with practitioner via "support and supervision through daily telephone contacts, weekly foster parents support group meetings and a 24-hour on-call crisis intervention"</p> <p>Children receive direct service with behavioural specialist at preschool/day care and home</p> <p>Children attend weekly "therapeutic" playgroup sessions</p>	<p>Child behaviour management</p> <p>Foster parents training focuses on positive parenting strategies to promote child psychosocial development and behavioural regulation (warm, responsive, consistent home environment)</p> <p>Positive reinforcement</p> <p>Close supervisions and engagement</p> <p>Labelling target behaviours and tracking their occurrence</p> <p>Using behaviour contracting with rewards and star charts to increase prosocial behaviour</p> <p>Using time-out and other contingent approaches to setting limits</p> <p>Individualised child treatment teaches</p>

Intervention delivery	Intervention content
	<p>prosocial skills to improve behaviour</p> <p>Weekly playgroup focuses on skills for school readiness such as early literacy</p>

5. Early Start

Study ID (first surname + year) Fergusson 2005a; Fergusson 2005b (Evaluation report); Fergusson 2006; Fergusson 2012 (Evaluation report); Fergusson 2013	Initials of person extracting data MT Date: 16/5/2013
Full citation <p>Fergusson, D. M., Grant, H., Horwood, L. J., & Ridder, E. M. (2005a). Randomized trial of the early start program of home visitation. <i>Pediatrics</i>, 116(6), E803-E809.</p> <p>Fergusson, D., Horwood, J., Ridder, E., & Grant, H. (2005b). <i>Early start evaluation report</i>. Early Start Project Ltd. Retrieved from http://www.otago.ac.nz/christchurch/otago014859.pdf</p> <p>Fergusson, D. M., Grant, H., Horwood, L. J., & Ridder, E. M. (2006). Randomized trial of the Early Start program of home visitation: Parent and family outcomes. <i>Pediatrics</i>, 117(3), 781-786.</p> <p>Fergusson, D., Boden, J., & Horwood, J. (2012). <i>Early start evaluation report: Nine year follow-up</i>. Ministry of Social Development. Retrieved from http://www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/evaluation/early-start-evaluation-report-nine-year-follow-up.pdf</p> <p>Fergusson, D. M., Boden, J. M., & Horwood, L. J. (2013). Nine-Year Follow-up of a home-visitation program: A randomized trial. <i>Pediatrics</i>, 131(2), 297-303. doi: 10.1542/peds.2012-1612.</p>	
Papers cited/referenced in this paper that relate to this intervention but are not already included in the REA	
Was a cluster design used? If so, clustered by schools, communities, families etc.? No	
Country in which study was conducted New Zealand	
Inclusion criteria (what are the criteria for participant inclusion in the study)? Children: Parents: Plunket nurses were asked to refer any family in which 2 or more risk factors were present based on a 11-point screening measure based on the measure used in the Hawaii Healthy Start Program (contained items relating to maternal age, extent of family support, wantedness of pregnancy, substance use, family violence and child abuse risk.). In addition, Plunket nurses were asked to refer any family in which there were serious concerns about the family's	

capacity to care for the child. Referral was made within 3 months of birth.

Exclusion criteria (what are the criteria for participant exclusion from the study)?

Children:

Parents:

Participant demographics at baseline (provide family/household/school etc. details if child/parent details not given)

		Intervention	Comparison
Number assigned	Children	206	221
	Parents		
Number in final analysis	Children	184	207
	Parents		
Age (mean, SD, range)	Children		
	Parents	Mean = 24.6 years (mother)	Mean = 24.4 years (mother)
Sex	Children		
	Parents		
Education	Parents	70.6% lacked educational qualifications (mother)	69.9% lacked educational qualifications (mother)
Ethnicity/indigenous	Parents	24.8% Maori (mother)	26.7% Maori (mother)
	Children		

Notes

Vulnerability or maltreatment issues (Reason this child/parent/family is in this intervention? Select as many as applicable.)

	Intervention Yes/no	Comparison Yes/no
History of maltreatment (either parents as abusers or children were abused)		
At-risk of maltreatment (no description of reason)	Yes	Yes
Vulnerable, troubled or fragile (use these phrases but no		

mention of maltreatment)		
Domestic, family or intimate partner violence	Yes	Yes
Teen parent		
Low SES/disadvantaged		
Parental substance abuse	Yes	Yes
Parent was maltreated as a child		
Parent has a physical disability		
Parent has learning disability/difficulty or intellectual disability		
Parent has a mental illness		
Child has a disability or additional needs		
Other (please list)		
Cannot tell		

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	Yes
Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
No treatment (no further detail required)	
Treatment as usual/usual care	Yes
Waitlist	
Alternate treatment	

Brief description of each condition being

<p>Treatment – Healthy Start programme</p> <p>Comparison – families provided existing child health and related services.</p>
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Intervention delivery and dose (select as many as applicable)		
		Intervention Yes/no
At what level was it delivered?	Individual parents	
	Individual parent-child dyads	
	Individual children	
	Individual families	Yes
	Groups of parents	
	Groups of parent-child dyads	
	Groups of children	
	Groups of families	
	Household	
	School	
	Community/region	
	Cannot tell	
Setting of delivery	Home	Yes
	School	
	Clinic, medical or health	
	Community	
	Other	
	Cannot tell	
Outcome domains targeted	Child development	Yes
	Child behaviour	Yes
	Safety and physical wellbeing	Yes
	Basic child care	
	Parent-child relationship	Yes
	Family relationship	Yes
	Systems outcomes	Yes
Dose	Number of sessions	There were 4 levels of service delivery which were based on family needs.

		<p>1. High need: One–two hours home visitation per week.</p> <p>2. Moderate need: Up to one-hour home visitation per fortnight.</p> <p>3. Low need: Up to one-hour home visitation per month.</p> <p>4. Graduate: Up to one-hour contact (phone/home visitation) per three months.</p>
	Duration of sessions	Cannot tell
	Total duration of program	36 months (Median = 24 months)
Person delivering	Was it a professional? (person with qualifications, for e.g., social worker, psychologist, nurse, teacher, youth worker)	Yes
	Was it a non-professional? (e.g., peer, paraprofessional, person that may be trained but does not have a qualification relevant to family support/education or child welfare etc.)	
	Cannot tell	

Results

Fergusson et al. 2005a

<u>Outcomes</u>	<u>Measures</u>	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'.	<u>Follow-up</u>
Outcome reported in results	How		Longest point of follow up (i.e., 6 months; 1 year)
			They have to

				[MB1]
		<u>Control</u>	<u>Early Start</u>	
Mean number of GP visits	Medical records		+ (More visits) compared to control	0-36 months
% Up to date with well-child checks	Medical records		+ (Greater percentage) compared to control	0-36 months
% Attended hospital for accident/injury or accidental poisoning	Medical records		+ (Smaller percentage) compared to control	0-36 months
% Enrolled with dental nurse/dentist at 36 months	Medical records		+ (Greater percentage) compared to control	At 36 months
Mean duration of early childhood education	To assess the extent to which families used nonmedical community services, 2 measures of service utilization were developed: (1) the duration of the child's attendance at preschool education services by 36 months and (2) the number of community service agency contacts that the family had made up to 36 months.		+ (Greater duration) compared to control	0-36 months
Mean number of community service contacts			+ (Greater number) compared to control	0-36 months
Mean positive	49-item parenting		+ (Greater score)	At 36 months

parenting attitudes	questionnaire that contained items derived from the Child Rearing Practices Report and the Adult-Adolescent Parenting Inventory		compared to control	
Mean non-punitive attitudes			+ (Greater score) compared to control	At 36 months
Mean parenting score			+ (Greater score) compared to control	At 36 months
% Parental report of severe physical assault	Parental report of severe punishment of the child by either parent, based on the severe/very severe assault subscales of the Parent-Child Conflict Tactics Scale		+ (Smaller percentage) compared to control	0-36 months
Mean internalizing problems score	Infant Toddler Social and Emotional Assessment scale		+ (Lower score) compared to control	At 36 months
Mean total behaviour problems score			+ (Lower score) compared to control	At 36 months

Fergusson et al. 2005b

<u>Outcomes</u>	<u>Measures</u>	<u>Effect: Post intervention results.</u> Indicate if significant and the direction by using '+' or '-'. <u>Control</u> <u>Early Start</u>		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
Outcome reported in results	How measured			
Mean number of GP visits	Medical records		+ (More visits) compared to control	0-36 months
% Up to date with well-child checks	Medical records		+ (Greater percentage) compared to control	0-36 months

% Attended hospital for accident/injury or accidental poisoning	Medical records		+ (Smaller percentage) compared to control	0-36 months
% Enrolled with dental nurse/dentist at 36 mo	Medical records		+ (Greater percentage) compared to control	At 36 months
Mean duration of early childhood education	To assess the extent to which families used nonmedical community services, 2 measures of service utilization were developed: (1) the duration of the child's attendance at preschool education services by 36 months and (2) the number of community service agency contacts that the family had made up to 36 months.		+ (Greater duration) compared to control	0-36 months
Mean positive parenting attitudes	49-item parenting questionnaire that contained items derived from the Child Rearing Practices Report and the Adult-Adolescent Parenting Inventory		+ (Greater score) compared to control	At 36 months
Mean non-punitive attitudes			+ (Greater score) compared to control	At 36 months
Mean parenting score			+ (Greater score) compared to control	At 36 months
% Parental report of severe physical assault	Parental report of severe punishment of the child by either parent, based on the		+ (Smaller percentage) compared to control	0-36 months

	severe/very severe assault subscales of the Parent-Child Conflict Tactics Scale			
Mean internalizing problems score	Infant Toddler Social and Emotional Assessment scale		+ (Lower score) compared to control	At 36 months
Mean total behaviour problems score			+ (Lower score) compared to control	At 36 months
Fergusson et al. 2006				
<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. Control		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
			Early Start	
There were no significant differences between the Early Start and control series in any comparisons				
Fergusson et al. 2012				
<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. <u>Control</u>		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
			Early Start	
% Attending hospital for unintentional injury	Medical records		+ (Smaller percentage) compared to control	0-9 years
% Severe/very severe physical assault by any parent	Parent-Child Conflict Tactics Scale		+ (Smaller percentage) compared to controls	0-9 years
% Parent-reported	Medical records		+ (Smaller	0-9 years

harsh punishment			percentage) compared to control	
% agency contact for child abuse/neglect	Questionnaire items in which families were asked about contact with a range of services because of physical child abuse		+ (Smaller percentage) compared to control	0-9 years
Mean physical punishment score	49-item parenting questionnaire that contained items derived from the Child Rearing Practices Report and the Adult-Adolescent Parenting Inventory		+ (Lower score) compared to control	0-9 years
Mean parenting competence score			+ (Higher score) compared to control	5, 6, 9 years
Mean externalising problems score	Strengths and difficulties questionnaire		+ (Lower score) compared to control	5, 6, 9 years
Mean internalising problems score	Strengths and difficulties questionnaire		+ (Lower score) compared to control	5, 6, 9 years
Mean total parent- reported SDQ score	Strengths and difficulties questionnaire		+ (Lower score) compared to control	5, 6, 9 years
Fergusson et al. 2013				
<u>Outcomes</u> Outcome reported in results	<u>Measures</u> How measured	<u>Effect</u> : Post intervention results. Indicate if significant and the direction by using '+' or '-'. Control Early Start		<u>Follow-up</u> Longest point of follow up (i.e., 6 months; 1 year)
% Attending hospital for unintentional	Medical records		+ (Smaller percentage) compared to	0-9 years

injury			control	
% Parent-reported harsh punishment	Medical records		+ (Smaller percentage) compared to control	0-9 years
Mean physical punishment score	49-item parenting questionnaire that contained items derived from the Child Rearing Practices Report and the Adult-Adolescent Parenting Inventory		+ (Lower score) compared to control	0-9 years
Mean parenting competence score			+ (Higher score) compared to control	5, 6, 9 years
Mean total parent-reported SDQ score	Strengths and difficulties questionnaire		+ (Lower score) compared to control	5, 6, 9 years

Intervention delivery	Intervention content
<u>Essential features only as authors report service provision is flexible and it is difficult to provide account of the work undertaken</u> Individualised service planning Assessment of family needs, issues, challenges strengths and resources Focus on relationship development between worker and family Collaborative problem solving focused on family challenges Supporting, teaching, mentoring and advice to assist client families to use their strengths and resources	<u>Essential features only as authors report service provision is flexible and it is difficult to provide account of the work undertaken</u> Child health (timely medical visits, compliance with immunisation and wellbeing checklists, Home safety and home environment Parenting skills (parental sensitivity, positive parenting and non-punitive parenting) Supporting parental physical and mental health (reductions of unplanned pregnancies, early detection and treatment of depression/anxiety/substance abuse) Family economic and material wellbeing (budgeting, employment) Positive adult relationships Crisis management

6. Parent training prevention model – description

Study ID (first surname + year) Peterson et al 2003	Initials of person extracting data MT Date 17/5/2013
Full citation Peterson, L., Tremblay, G., Ewigman, B., & Saldana, L. (2003). Multilevel selected primary prevention of child maltreatment. <i>Journal of Consulting and Clinical Psychology</i> , 71(3), 601-612. doi:10.1037/0022-006X.71.3.601	
Papers cited/referenced in this paper that relate to this intervention but are not already included in the REA	
Was a cluster design used? If so, clustered by schools, communities, families etc.? No	
Country in which study was conducted USA	
Inclusion criteria Children: Children who were 18 months through to 4 years of age Parents: Women: Medicaid eligible (as an index of low-income status) and to have less than 2 years of college (to rule out graduate students with children, whose eligibility for Medicaid was likely to be brief).	
Exclusion criteria Children: Parents: If there was a specific reason that the mother would not be able to profit from the intensive training we offered because of lack of communication ability or high levels of interfering psychological distress. Specifically, if mothers did not speak fluent English or showed diagnosable levels of serious depression or delusional symptoms (assessed in the first of the pretest questions with the Diagnostic Interview Schedule [3rd ed., rev.; DIS-III-R]; Robins, Helzer, Cottler, & Goldring, 1989; DIS-IV criteria were not available at the time the study began).	

Participant demographics at baseline

		Intervention	Comparison (Diary-only group)	Comparison (No-diary group)
Number assigned to groups	Children			
	Parents	42	32	25
Number in final analysis	Children			
	Parents	69% completed 1yr followup	52% completed 1yr followup	49% completed 1yr followup
Age (mean, SD, range)	Children			
	Parents	Mean = 27.81 years; SD = 5.48 years.	Mean = 29.03 years; SD = 6.51 years	Mean = 27.56 years; SD = 6.03 years
Sex	Children			
	Parents	100% Female	100% Female	100% Female
Education	Parents	Mean = 11.90 years; SD = 1.45 years	Mean = 12.22 years; SD = 1.07 years	Mean = 12.04 years; SD = 1.14 years
Ethnicity/indigenous	Parents	16% African American; 76% Caucasian; 7% Other minority	28% African American; 59% Caucasian; 13% Other minority	24% African American; 72% Caucasian; 4% Other minority
	Children			

Notes

Vulnerability or maltreatment issues (Reason this child/parent/family is in this intervention. Select as many as applicable.)

	Intervention Yes/no	Comparison Yes/no
History of maltreatment (either parents as abusers or children were abused)		
At-risk of maltreatment (no description of reason)		
Vulnerable, troubled or fragile (use these phrases but no		

mention of maltreatment)		
Domestic, family or intimate partner violence		
Teen parent		
Low SES/disadvantaged	Yes	Yes
Parental substance abuse		
Parent was maltreated as a child		
Parent has a physical disability		
Parent has learning disability/difficulty or intellectual disability		
Parent has a mental illness		
Child has a disability or additional needs		
Other (please list)	Population at risk of child maltreatment	Population at risk of child maltreatment
Cannot tell		

Intervention and comparison conditions

What type of approach was the intervention? (refer to definitions)

Approach type	Yes/no
Program	Yes
Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
No treatment (no further detail required)	Yes
Treatment as usual/usual care	
Waitlist	
Alternate treatment	Yes

Brief description of each condition being compared

Treatment – Parent training intervention (Multi-component program using role-playing, Socratic dialogue, modeling, and discussion of barriers to the curriculum . It involves group therapy, home-visiting, practice work done at home)

Comparison – Diary-only group

Comparison – No diary group

Intervention delivery and dose (select as many as applicable)

		Intervention Yes/no
At what level was it delivered?	Individual parents	Yes
	Individual parent-child dyads	
	Individual children	
	Individual families	
	Groups of parents	Yes
	Groups of parent-child dyads	
	Groups of children	
	Groups of families	
	Household	
	School	
	Community/region	
	Cannot tell	
Setting of delivery	Home	Yes
	School	
	Clinic, medical or health	
	Community	
	Other	
	Cannot tell	
Outcome domains targeted	Child development	Yes
	Child behaviour	Yes
	Safety and physical wellbeing	Yes
	Basic child care	
	Parent-child relationship	Yes
	Family relationship	
	Systems outcomes	
Dose	Number of sessions	15 sessions (the 16 th session had no content).
	Duration of sessions	Group: not indicated. Home visit: 90 minutes.

Intervention delivery	Intervention content
<p>Nondidactic, continuous interaction between group members and group facilitator</p> <p>Written materials outlining group curriculum</p> <p>Group start with one or more women sharing a positive experience with child that happened over the week</p> <p>Review of previous week's curriculum</p> <p>Role-playing</p> <p>Socratic dialogue</p> <p>Modelling</p> <p>Discussion of barriers to the curriculum use</p> <p>Homework tasks</p>	<p>Main focus is on child behaviour management</p> <p>Problem solving</p> <p>Time management</p> <p>Positive parenting techniques such as child-led play, distraction, "catching child being good" and effective compliance strategies</p> <p>Anger management</p> <p>Time out for difficult child behaviour</p> <p>Child health and safety issues (e.g., losing control or leaving child with someone who might lose control)</p>

7. Parents Under Pressure (PUP)

Study ID (first surname + year) Dawe & Harnett 2007	Initials of person extracting data MT Date: 17/5/2013			
Full citation Dawe, S., & Harnett, P. (2007). Reducing potential for child abuse among methadone-maintained parents: Results from a randomized controlled trial. <i>Journal of Substance Abuse Treatment</i> , 32 (4), 381-390. doi:10.1016/j.jsat.2006.10.003				
Papers cited/referenced in this paper that relate to this intervention but are not already included in the REA				
Was a cluster design used? If so, clustered by schools, communities, families etc.? No				
Country in which study was conducted Australia				
Inclusion criteria (what are the criteria for participant inclusion in the study)? Children: Parents: The primary carer needed to be receiving methadone, have at least one child aged between 2 and 8 years in their full-time care, and be able to understand and read English.				
Exclusion criteria (what are the criteria for participant exclusion from the study)? Children: Parents:				
Participant demographics at baseline (provide family/household/school etc. details if child/parent details not given)				
		Intervention (PUP)	Comparison (Brief intervention)	Comparison (Usual care)
Number assigned	Children			
	Parents	22	23	19
Number in final analysis	Children			

	Parents	20	20	13
Age (mean, SD, range)	Children	*Mean = 45.9 months; SD = 17.2 months		
	Parents	*Mean = 30.33 years; SD = 6.34 years		
Sex	Children	* 60.9% Male		
	Parents	* 84.4% Female		
Education	Parents			
Ethnicity/indigenous	Parents			
	Children			
Notes				
* Aggregate demographic data reported for the entire sample N=64.				

Vulnerability or maltreatment issues (Reason this child/parent/family is in this intervention? Select as many as applicable.)

	Intervention Yes/no	Comparison Yes/no
History of maltreatment (either parents as abusers or children were abused)		
At-risk of maltreatment (no description of reason)		
Vulnerable, troubled or fragile (use these phrases but no mention of maltreatment)		
Domestic, family or intimate partner violence		
Teen parent		
Low SES/disadvantaged		
Parental substance abuse	Yes	Yes
Parent was maltreated as a child		
Parent has a physical disability		
Parent has learning disability/difficulty or intellectual disability		
Parent has a mental illness		
Child has a disability or additional needs		
Other (please list)		
Cannot tell		

Intervention and comparison conditions**What type of approach was the intervention? (refer to definitions)**

Approach type	Yes/no
Program	Yes
Service model	
System of care	

What type of comparison condition was used?

Comparison condition	Yes/no
No treatment (no further detail required)	
Treatment as usual/usual care	Yes
Waitlist	
Alternate treatment	Yes

Brief description of each condition being compared**Treatment** – Parents Under Pressure (PUP) program**Comparison** – Brief Clinic Intervention**Comparison** – Standard Care**Intervention delivery and dose (select as many as applicable)**

		Intervention Yes/no
At what level was it delivered?	Individual parents	Yes
	Individual parent-child dyads	
	Individual children	
	Individual families	
	Groups of parents	
	Groups of parent-child dyads	
	Groups of children	
	Groups of families	
	Household	
	School	
	Community/region	
	Cannot tell	

Setting of delivery	Home	Yes
	School	
	Clinic, medical or health	
	Community	
	Other	
	Cannot tell	
Outcome domains targeted	Child development	
	Child behaviour	Yes
	Safety and physical wellbeing	Yes
	Basic child care	
	Parent-child relationship	
	Family relationship	Yes
	Systems outcomes	
Dose	Number of sessions	Mean = 10.5 face-to-face sessions; SD = 2.9 sessions. Range = 8 to 14 sessions (PUP group)
	Duration of sessions	1-2 hours
	Total duration of program	10-12 weeks
Person delivering	Was it a professional? (person with qualifications, for e.g., social worker, psychologist, nurse, teacher, youth worker)	Yes
	Was it a non-professional? (e.g., peer, paraprofessional, person that may be trained but does not have a qualification relevant to family support/education or child welfare etc.)	
	Cannot tell	

Results

<u>Outcomes</u>	<u>Measures</u>	<u>Effect: Post intervention results. Indicate if significant and the direction by using '+' or '-'.</u>	<u>Follow-up</u>
Outcome reported in results	How measured		Longest point of follow up (i.e., 6

					months; 1 year)
		Standard Care	wo-session parenting education intervention	T Parents Under Pressure	
Perceived stress in the parenting role	Parenting Stress Index	No change	No change	+ (Lower score). Change significantly different from zero	6 months
Child abuse potential	Child Abuse Potential Scale	- (Higher score). Change significantly different from zero	+ (Lower score). Change significantly different from zero ($p<0.05$)	+ (Lower score). Change significantly different from zero ($p<0.001$)	6 months
Rigid or harsh parenting beliefs and attitudes	Child Abuse Potential Scale			+ (Lower score). Change significantly different from zero	6 months
Parental methadone dose	Case records			+ (Lower score). Change significantly different from zero	6 months
Child behaviour problem score	Strengths and Difficulties Questionnaire			+ (Lower score). Change significantly different from zero	6 months

Intervention delivery	Intervention content
<p>Begins with assessment and individualised case planning in collaboration with parents</p> <p>Additional case management can occur outside treatment session (e.g., housing, legal advice, school intervention)</p>	<p>10 modules</p> <p>Strengthen the parent's view that they are competent in parenting role</p> <p>Help parents develop skills in coping with negative emotional states through use of mindfulness skills</p> <p>Positive parenting skills including praise, rewards for good behaviour, and child-centred play skills</p> <p>Non-punitive child management techniques such as time out</p> <p>Coping with lapse and relapse (to use of alcohol and drugs)</p> <p>Extending social networks</p> <p>Life skills: practical advice re diet and nutrition, budgeting, health care and exercise</p> <p>Relationships (effective communication between partners)</p>

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